								Application or Docket Number					
PATENT APPLICATION FEE DETERMINATION REC								D=					
				P24732									
		CLAIMS A						SMALL	ENTITY		OTHE	R THAN	
٦			(Columi	<u>n 1)</u>	(Col	lumn 2)	3	TYPE		OR		ENTITY	
Ľ	OTAL CLAIMS	3	Ч	<u> </u>				RATE	FEE	]	RATE	FEE	
LE!	OR		NUMBEF	R FILED	NUM	NUMBER EXTRA		BASIC-F	EE 385.00	OR	BASIC FEE	7.70.00	
Ţſ	OTAL CHARGE	EABLE CLAIMS	_	9 minus 20=		•		XS 9=	- <u> </u>	OR	X\$18=		
IN	DEPENDENT C	CLAIMS	/ п	ninus 3 =		· 		X43=		OR	Yes	<del>                                     </del>	
М	JETIPLE DEPE	ENDENT CLAIM P	RESENT	RESENT				145-	<del> </del>			<del>                                     </del>	
=!:	f the differenc	e in column 1 is	s-less than-z	eroenter		column-2		+145=		OR			
	•					5010	•	TOTAL		OR	TOTAL	770	
		CLAIMS AS A (Column 1)	<b>MENDER</b>	D - PART Colum)		(Column 3)		SMAL	L ENTITY	OR	OTHER SMALL		
Ā	T	CLAIMS	T	HIGHE	EST		] [		ADDI-	7	J	ADDI-	
ENT/		REMAINING AFTER AMENDMENT		PREVIO	USLY	PRESENT EXTRA		RATE			RATE	TIONAL FEE	
AMENDMENT	Total		Minus	**	·	=		X\$ 9=		OR	X\$18=		
ME	Independent	*	Minus	***		=		X43=	+		X86=	<b> </b>	
_	FIRST PRESE	ENTATION OF MU	ULTIPLE DEI	PENDENT	CLAIM		l			OR	7.00		
-	in the state of th	. ~		et.				+145=		OR	+290=		
							£	TOTA ADDIT. FE	_	OR	TOTAL ADDIT. FEE		
		(Column 1)		(Colum		(Column 3)				_			
MENT B		CLAIMS- REMAINING AFTER AMENDMENT		HIGHE NUMBI PREVIOL PAID FI	BER USLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
NON.	Total	<b>*</b>	Minus —	**	·. ·	=	-	X\$ 9=		OR	X\$18=		
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جمسدة	. Indicates accomply of Microson are given a sufficiently former of Page 11.	Thinks In a second of the seco	• • • · · · · · · · · · · · · · · · · ·			11. No. 10. 10. 10. 10. 10. 10. 10. 10. 10. 10	L	+145=		OR	+290=	•	
	The second secon	erek i i e e	A	TOTAL DDIT. FEE		OR ,	TOTAL ODIT. FEE						
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ENTC		CLAIMS REMAINING AFTER AMENDMENT		HIGHES NUMBE PREVIOU PAID FO	ER JSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
Ş Q	Total	•	Minus	**		=	1	X\$ 9=		ŎR	X\$18=	<u> </u>	
≨ ŀ	Independent		Minus	state .		=	+		† 1				
<u> </u>	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							X43=	<del>                                     </del>	OR	X86=		
- H	'in colur		+145=		OR	+290=							
** H	f the "Highest Nurr	mn 1 is less than the mber Previously Pai mber Previously Pai	id For IN THIS	S SPACE is le	ess than	1 20, enter "20."	AL	TOTAL DDIT. FEE		OR A	TOTAL DDIT. FEE		
T	he *Highest Num	nber Previously Paid	J For (Total or	Independent	t) is the	highest number	foun	d in the ap	oropriate box	in colu	mn 1.		

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